

Practition r's Docket No. RPS8-2002-0499

Customer No.: 25299

**PATENT** 

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**Mail Stop Patent Application Commissioner for Patents** P.O. Box 1450 Alexandria, VA 22313-1450



### **NEW APPLICATION TRANSMITTAL**

Transmitted	herewith	for	filing	is	the	patent	ap	plication	of

Inventor(s): William Noonan

SYSTEM & METHOD OF UPDATING PLANOGRAM INFORMATION USING For (title): RFID TAGS AND PERSONAL SHOPPING DEVICE

#### **Type of Application** 1.

This transmittal is for an original (nonprovisional) application.

CERTIFICATION UNDER 37 C.F.R. SECTIONS 1.8(a) AND 1.10\*

I hereby certify that, on the date shown below, this correspondence is being:

#### **MAILING**

[X] deposited with the United States Postal Service in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

37 C.F.R. Section 1.8(a)

37 C.F.R. Section 1.10\*

[] with sufficient postage as first class mail. [X] as "Express Mail Post Office to Address"

(mandatory)

#### TRANSMISSION

transmitted by facsimile to the Patent and Trademark Office (703) []

Patricia Jarnagin

(type or print name of person certifying)

### 2. Papers Enclosed

- A. Required for filing date under 37 C.F.R. 1.53(b) (Regular) or 37 C.F.R. 1.153 (Design) Application
- 9 Page(s) of Specification
- 3 Page(s) of Claims
- 1 Sheet(s) of Drawing(s)--Formal

## B. Other Papers Enclosed

- 2 Page(s) of declaration and power of attorney
- 1 Page(s) of abstract

## 3. Additional Papers Enclosed

## 4. Assignment

An assignment of the invention to **International Business Machines Corporation**; **Armonk, NY** is will be provided at a later date.

# 5. F Calculation (37 C.F.R. S ction 1.16)

Regular Application

## **CLAIMS AS FILED**

Claims	Number Filed	Basic Fee Allowance	Number Extra	Rate	Basic Fee 37 CFR 1.16(a) \$710.00
Total Claims	20	20	0	\$0	\$0.00
Independent Claims	3	3	0	\$0	\$0.00
Multiple Dependent Claims					\$0.00
Filing Fee Calculation					\$750.00

# 7. Fee Payment Being Made at This Time

**Enclosed** 

Filing Fee

\$750.00

**Total Fees Enclosed** 

\$750.00

# 8. Method of Payment of Fees

Charge Account No. 09-1990 in the amount of \$750.00. A duplicate of this transmittal is attached.

07/24/2003 SSITHIB1 00000036 091990 10624322 01 FC#1001 750.00 DA

#### 9. **Authorization to Charg Additional Fees**

The Commissioner is hereby authorized to charge the following additional fees by this paper and during the entire pendency of this application to Account No. 09-1990.

37 C.F.R. Section 1.16(a), (f) or (g) (filing fees)

37 C.F.R. Section 1.16(b), (c) or (d) (presentation of extra claims)

#### 10. Instructions as to Overpayment

Credit Account No. 09-1990.

J. Bruge Schelkopf Registration No. 43,901 919-543-4753

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